

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 79
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Robert Olson

Mailing Address 26561 W Highland Dr

City State Zip Code
 Channahon IL 60410

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2012

Transaction ID : C5006761

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. FRANCISCO M PEREZ

Mailing Address 180 WATERMAN AVE APT 423

City State Zip Code
 NORTH PROVIDENCE RI 02911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2012

Transaction ID : C5011696

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. FRANCISCO M PEREZ

Mailing Address 180 WATERMAN AVE APT 423

City State Zip Code
 NORTH PROVIDENCE RI 02911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2012

Transaction ID : C5011697

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00